



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL				
OMB Number:	3235-0076			
Expires:				
Estimated average burden				
hours per response16.00				

SEC U	SE ONLY
Prefix	Serial
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DATE	RECEIVED
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Name of Offering (  check if this is an amendment and name has changed, and indicate changed)	ange )
Limited Liability Company Interests in the Common Sense Enhanced Return, LLC,	
	ection 4(6) ULOE
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 So Type of Filing: New Filing Amendment	etion 4(6) USENE
Type of Filling.	
A. BASIC IDENTIFICATION DAT	ra
1. Enter the information requested about the issuer	07080608
Name of Issuer ( check if this is an amendment and name has changed, and indicate change	c.)
Common Sense Enhanced Return, LLC, CSP Series	
Address of Executive Offices (Number and Street, City, State, Z	p Code) Telephone Number (Including Area Code)
15350 S.W. Sequoia Parkway, Suite 140, Portland, OR 97224	(503) 639-6551 <b>PROCESSEC</b>
Address of Principal Business Operations (Number and Street, City, State, Z	(ip Code) Telephone Number (Including Area Code)
(if different from Executive Offices)	- OCT 2 2 211177
Brief Description of Business	Tuga sa
private investment company	THOMSON
	FINANCIAL
Type of Business Organization	
corporation limited partnership, already formed	other (please specify): limited liability company
business trust limited partnership, to be formed	•
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 8 0 7 Actual	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation CN for Canada; FN for other foreign jurisdicti	
2	, ME

#### GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Common Sense Investment Management LLC Business or Residence Address (Number and Street, City, State, Zip Code) 15350 S.W. Sequoia Parkway, Suite 140, Portland, OR 97224 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Harbolt, Thomas P. - Partner of Common Sense Investment Management LLC, Managing Member Business or Residence Address (Number and Street, City, State, Zip Code) 15350 S.W. Sequoia Parkway, Suite 140, Portland, OR 97224 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Bisenius, Janet L. Business or Residence Address (Number and Street, City, State, Zip Code) 15350 S.W. Sequoia Parkway, Suite 140, Portland, OR 97224 Check Box(es) that Apply: Promoter General and/or Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Executive Officer Director General and/or Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					В. К	NFORMAT	ION ABOU	T OFFERI	NG					
1.	<u> </u>							Yes	No 🗷					
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?								s 1,000,000.00 *						
									Yes	No				
3.										K				
4.	commis If a pers or states	sion or sim son to be lis s. list the na	ilar remune ted is an ass	ration for s sociated pe roker or de	solicitation erson or age caler. If me	of purchase ent of a brok ore than five	ers in conno ter or deale e (5) persoi	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state sons of such			
Ful		Last name	first, if indi	vidual)										
		Residence	Address (N	lumber and	d Street, Ci	ity. State, Z	(ip Code)							
<del></del>		I.D.	oker or De			-·· <u>-</u>					_	_		
Nar	ne of As:	sociated Br	oker or De	aler										
Stat	tes in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		-					
	(Check	"All States	s" or check	individual	States)		.,	,				☐ All States		
	AL IL MT RI	IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO · LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OII WV	GA MN OK WI	MS OR WY	MO PA PR	
Ful	l Name (	Last name	first, if indi	ividual)										
Bus	siness or	Residence	Address (?	Number an	d Street, C	ity, State.	Zip Code)							
Nar	ne of As:	sociated Br	oker or De	aler	·									
Stat	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers							
	(Check "All States" or check individual States)								☐ Al	l States				
	ΛL	AK	AZ	AR	CA	CO	CT)	DE	DC	FL	GA		ID (MA)	
	IL MT	NE)	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA	
	RI	SC	SD	TN	TX	UT	VT	VA	$\overline{WA}$	WV	WI	WY	PR	
Ful	l Name (	Last name	first, if indi	vidual)		****								
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)							
Var	ne of Ac	engiated Dr	oker or Dea	ala#										
ivai.	ne or Ass	sociated bi	oker or Dea	arei										
Stat			Listed Has											
	(Check	"All States	or check	individual	States)		************	***************************************			***************************************		l States	
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH	OK	MS OR WY	MO PA PR	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

<sup>\*</sup> The Company has discretion to accept lessor amounts.

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggravata	Amount Already
	Type of Security	Aggregate Offering Price	Sold
	Debt	<u> </u>	<u>\$</u>
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	S	\$
	Partnership Interests		
	Other (Specify Limited Liability Company Interests - CSP. Series.	2,000,000,000	\$_13,555,690
	Total	<u>2,000,000,00</u> 0	\$ 13,555,690
	Answer also in Appendix. Column 3. if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	5	S_13,555,690
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		§ 10,320
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		s 10,320

	COPPERING PRICE NUM	BER OF INVESTORS TEXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross	·	\$ 1,999,989,680
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	·	_	
	Purchase of real estate		]\$	
	Purchase, rental or leasing and installation of macand equipment	hinery	7.¢	
	Construction or leasing of plant buildings and fac	<del>-</del>	<del>-</del> '	<del>_</del>
	Acquisition of other businesses (including the val offering that may be used in exchange for the assessuer pursuant to a merger)	ue of securities involved in this ets or securities of another	_	
	Repayment of indebtedness		] <b>s</b>	. 🗆 <b>s</b>
	Working capital		] \$	\$ 1,999,989,68
	Other (specify):		]\$	. 🗆 \$
			]\$	s
	Column Totals		] \$ <u>_0.00</u>	\$ 1,999,989,680
	Total Payments Listed (column totals added)		_	999,989,680
		D-FEDERAL-SIGNATURE: 2.3		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	undersigned duly authorized person. If this notice nish to the U.S. Securities and Exchange Commiss	is filed under Ru ion, upon writte	le 505, the following
	uer (Print or Type)		ate	
Co	ommon Sense Enhanced Return, LLC, CSP Series	Thomas P. Thelet	October 11, 200	7
	me of Signer (Print or Type)	Title of Signer (Print or Type)		
The	mas P. Harbolt	Partner of Common Sense Investment Manage	ment LLC, Mar	naging Member

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)